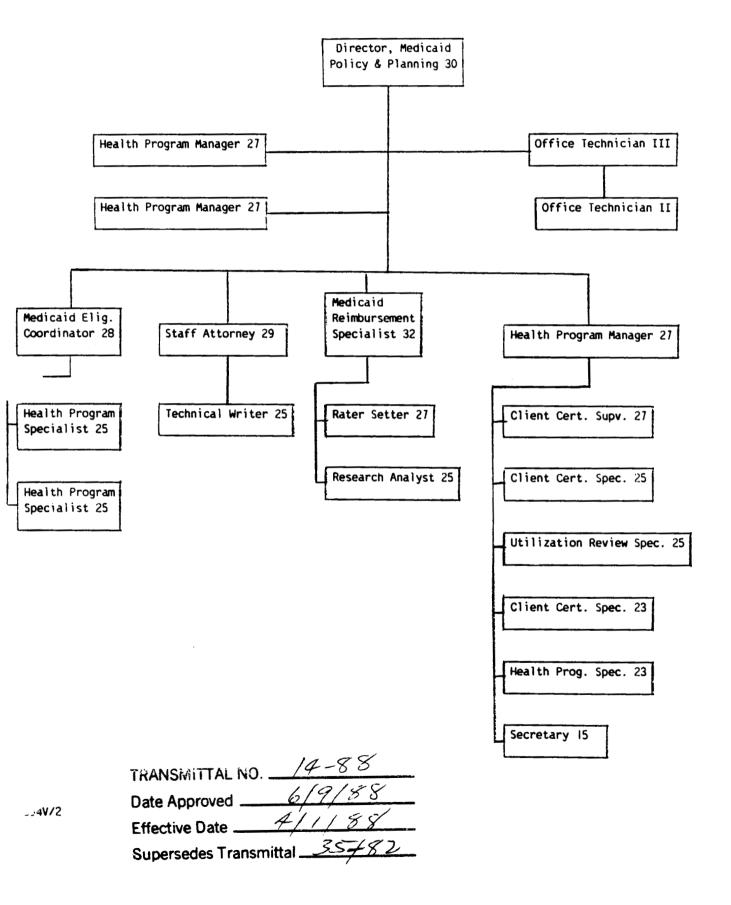
Bureau of Policy and Planning



BUREAU OF FINANCIAL SERVICES

The Bureau of Financial Services represents a consolidation of financial support activities within the Division of Health Care Financing. These activities are accomplished through four (4) units which are responsible for the following functions:

1. Audit

This unit conducts and/or coordinates all internal and external audits of Medicaid service programs and providers. Responsible for coordination and monitoring of all TPL activities, and selective SPR reviews. Conducts internal and operational audits of the Division of Health Care Financing.

2. Finance

This unit is responsible for all financial aspects to include appropriation request, budget and expenditure tracking for medical services and administration. Responsible for the management of the Management and Administrative Reporting Subsystem (MARS). Responsible for monitoring purchasing and financial monitoring of contracts. Monitors the acquisition of system hardware and software.

3. Information Systems:

This unit is responsible for coordination and monitoring of all Medicaid Management Information System (MMIS) development and maintenance. Responsible for the interface between MMIS users and EDP staff.

4. Quality Control

This unit is responsible for coordinating and monitoring federally mandated quality control systems including System Performance Review (SPR) and Claims Processing Assessment System (CPAS).

BUREAU DIRECTOR'S OFFICE

Function:

Coordinate and Manage the Unit Activity Within the Bureau.

Responsibility:

- 1. Management of the bureau
- 2. Management of special projects resources
- 3. Annual medical assistance publication
- 4. Graphic support
- 5. Provide backup secretarial support to the bureau
- 6. Maintain bureau library, including:

Utah State Plan Medicaid Bulletins Federal Manuals

- 7. Maintain Division Policy and Procedure Manual
- 8. Maintain Department Policy and Procedure Manual
- 9. Monitor Correspondence and filing system
- 10. Monitor division and bureau suspense system

AUDIT UNIT

Function:

Coordinate and Monitor Audit Function

Responsibility:

- Internal reviews (division) 1.
- 2. Provider audits
- 3. Hospital settlements
- 4. Internal financial support (division)
- Third party liability (TPL) monitoring 5.
- 6. Long-term-care audits
- 7. External audits
- 8. Manage contract audit resources

FINANCE UNIT

Function:

Manage All Financial Aspects of the Program

Responsibility:

- 1. Maintain an information base
- 2. Federal reporting
- 3. MARS maintenance, development, and training
- 4. Appropriation request, budget preparation, and expenditure tracking for medical services and administration
- 5. Annual medical assistance publication
- 6. Maintain an accounts receivable accounting system
- 7. Coordinate and monitor in-state and out-of-state travel requests
- 8. Maintain a collection system
- 9. Monitor purchase requisitions
- 10. Financial tracking of contracts
- 11. MARS balancing and output report distribution
- 12. Coordinate and monitor computer hardware and software acquisitions.

T.N. #<u>88-14</u> Supersedes T.N. #<u>35-82</u>

INFORMATION SYSTEMS UNIT

Function:

Coordinate and monitor MMIS system development and maintenance

Interface between users and EDP staff to coordinate needs and resources

Monitor the acquisition and use of personal computers

Responsibility:

- 1. MMIS development
- 2. MMIS maintenance
- 3. External Systems development
- 4. Personal computer acquisition and use
- 5. Long range system planning
- 6. Maintain MMIS library

QUALITY CONTROL UNIT

Functions:

Coordinate and monitor the Systems Performance Review (SPR)

Coordinate and monitor the Claims Processing and Assessment System (CPAS)

Quality control interface with the Department of Social Services (DSS)

Responsibility:

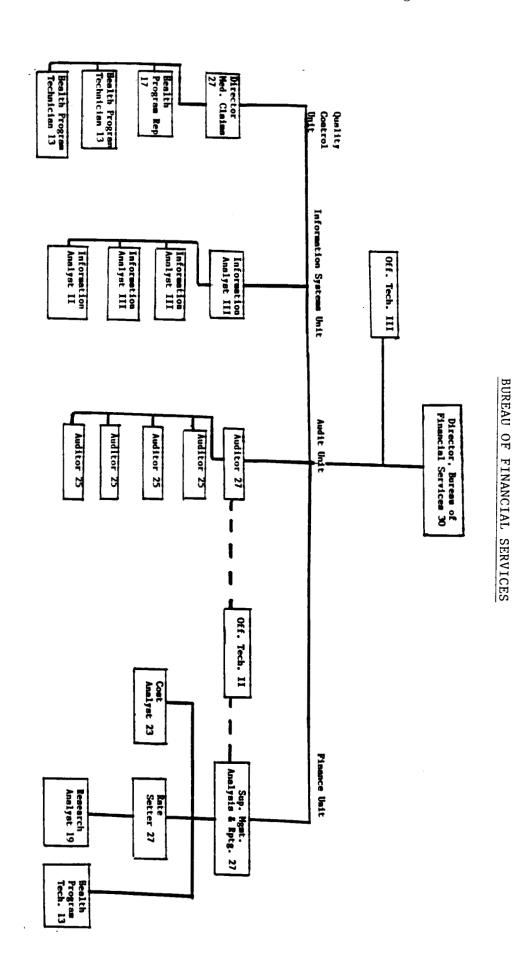
- 1. Coordinate and monitor the (SPR), which is a federal review for the Medicaid Management Information System (MMIS) designed to evaluate the effectiveness and efficiency of the Medicaid program based on certain performance standards.
- 2. Coordinate and monitor the (CPAS), which is state operated program for assessing the administration of the Medicaid program in accuracy of eligibility determinations, claims processing, and third party liability.
- 3. Department of Social Services Quality Control Claims Processing is a program designed to verify the accuracy in the Medicaid eligibility determination process payment.

42 CFR References:

431.16, 431.501-597, 431.620, 432.55, 432.60, 433.10-433.115

Staff of this Unit include:

Bureau Director
(2) Secretaries
Senior Financial Analyst
Supervisor, Management Analysis and Reporting
Research Analyst
Financial Analyst
Health Program Technician
Director of Audit Section
(4) Auditors
Director of Information Analysis
(3) Information Analysts
Director of Quality Control
(2) Health Program Technicians



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Supersedes Transmittal 35-8

BUREAU OF MANAGED HEALTH CARE

Function:

The general function of this bureau is to provide Medicaid clients with an informed choice of health care delivery programs, including Case Management or Health Maintenance Organization (HMO). The bureau monitors the performance of the capitated HMOs and also operates utilization review, prior authorization, post-payment review and S/URS functions.

Major Responsibilities:

Utilization review of acute inpatient hospital admissions

Pre-admission/prior authorization review of non-emergency inpatient hospital admissions, including psychiatric; also prepayment/concurrent review of outlier stays

Prior authorization of ambulatory care and surgical services

Operation of urban and rural Case Management program, including lock-in, client education and waiver continuity

Daily problem research and broad monitoring/negotiation of HMO contracting program

Program development for prepaid health plan services and other contracting initiatives

42 CFR References:

434 Subpart C. D and E. 441 Subpart E and F. 447.361-362, 455 Subpart A. 456

Staff of this Unit Include:

Director

(2) Secretaries

Office Technician II

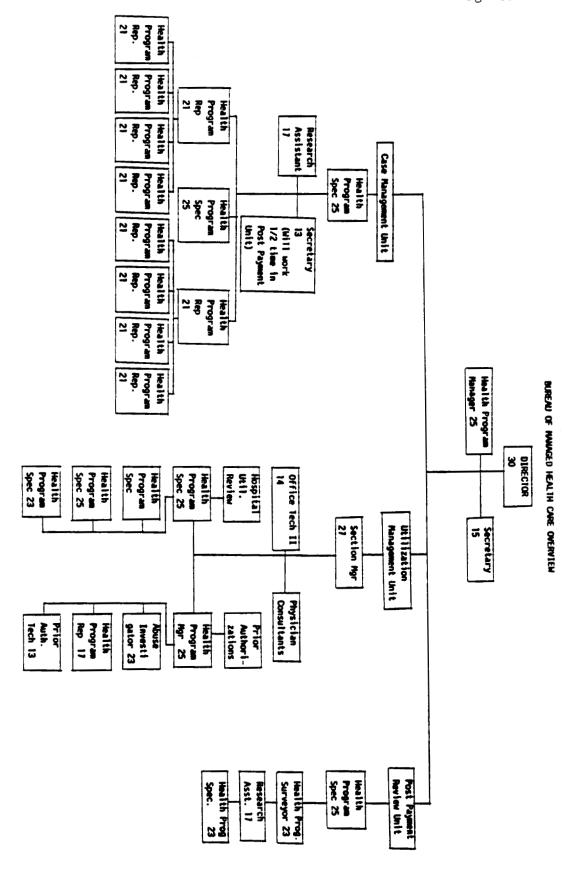
- (3) Health Program Managers
- (8) Health Program Specialists
- (2) Research Assistants
- (11) Health Program Representatives

Abuse Investigator

Prior Authorization Technician

Health Program Surveyor

T.N. #/4-88			(
Supersedés	Approval Date	6/9/88 Effective Date	4/1/88
I.N. # 35-82			



TRANSMITTAL NO. 14-88

Date Approved 6/9/88

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Supersedes Transmittal 3: 52-